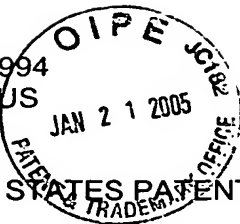


Attorney Docket: 081468-0284994
Client Reference: P-0226.010-US



ST COPY

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re PATENT APPLICATION of: AUER et al.

Confirmation Number: 1218

Patent No.: 6,791,664 B2
Issued: September 14, 2004

Group Art Unit: 2851

Application No.: 10/050,041
Filed: January 17, 2002

Examiner: Alan A. Mathews

Title: LITHOGRAPHIC APPARATUS, DEVICE MANUFACTURING METHOD, AND
DEVICE MANUFACTURED THEREBY.

REQUEST FOR CERTIFICATE OF CORRECTION
UNDER 37 U.S.C. §255 AND PURSUANT TO 37 C.F.R. §1.323

Mail Stop Certificate of Correction
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Certificate
FEB 01 2005
of Correction

Sir:

It is respectfully requested that a Certificate of Correction be issued in the subject patent for an error in the title.

Attached are two properly completed Certificate of Correction Forms PTO/SB/44 showing the corrections. It is requested that these forms be certified by the Commissioner, with one form being returned to the undersigned attorney.

Please charge the required Certificate of Correction fee of \$100.00 to our Deposit Account No. 03-3975, under the Order No. 81468/284994. A duplicate copy of this Request is provided for this purpose.

Respectfully submitted,
PILLSBURY WINTHROP LLP

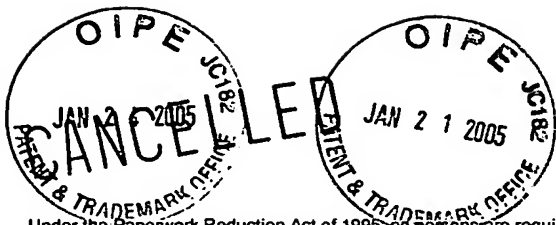

Emily T. Bell
Reg. No. 47418

Date: January 21, 2005
P.O. Box 10500
McLean, VA 22102
Tel. No. (703) 905-2012
Fax No. (703) 905-2500

Attachment: PTO/SB/44

01/27/2005 AWONDAF2 00000013 033975 6791664

01 FC:1811 100.00 DA



PTO/SB/17 (12-04)
Approved for use through 07/31/2005. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 100

Complete if Known

Application Number 10/050,041
Filing Date January 17, 2002
First Named Inventor FRANK AUER
Examiner Name Alan Matthews
Art Unit 2851
Attorney Docket No. 081468-0284994

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number 033975 Deposit Account Name: PILLSBURY WINTHROP LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☐ Charge any additional fee(s) or underpayment of fees(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit Card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	150	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims - 20 or HP = Extra Claims Fee (\$) = Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20
Indep. Claims - 3 or HP = Extra Claims Fee (\$) = Fee Paid (\$)
HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = Extra Sheets /50= Number of each additional 50 or fraction thereof Fee (\$) = Fee Paid (\$)
(round up to a whole number) x 250.00 =

4. OTHER FEE(S)

Non-English Specification, 130 fee (no small entity discount)

Other: Certificate of Correction Fee (\$100)

Fee Paid (\$)

100.00

SUBMITTED BY

Signature *Emily T. Bell* Registration No. 47418 Telephone 703.905.2261
Name (Print/Type) Emily T. Bell Date January 21, 2005

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

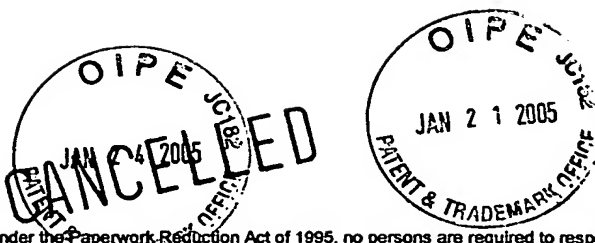
If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Privacy Act Statement

The **Privacy Act of 1974 (P.L. 93-579)** requires that you be given certain information in connection with your submission of the attached form related to a patent application or patent. Accordingly, pursuant to the requirements of the Act, please be advised that: (1) the general authority for the collection of this information is 35 U.S.C. 2(b)(2); (2) furnishing of the information solicited is voluntary; and (3) the principal purpose for which the information is used by the U.S. Patent and Trademark Office is to process and/or examine your submission related to a patent application or patent. If you do not furnish the requested information, the U.S. Patent and Trademark Office may not be able to process and/or examine your submission, which may result in termination of proceedings or abandonment of the application or expiration of the patent.

The information provided by you in this form will be subject to the following routine uses:

1. The information on this form will be treated confidentially to the extent allowed under the Freedom of Information Act (5 U.S.C. 552) and the Privacy Act (5 U.S.C. 552a). Records from this system of records may be disclosed to the Department of Justice to determine whether disclosure of these records is required by the Freedom of Information Act.
2. A record from this system of records may be disclosed, as a routine use, in the course of presenting evidence to a court, magistrate, or administrative tribunal, including disclosures to opposing counsel in the course of settlement negotiations.
3. A record in this system of records may be disclosed, as a routine use, to a Member of Congress submitting a request involving an individual, to whom the record pertains, when the individual has requested assistance from the Member with respect to the subject matter of the record.
4. A record in this system of records may be disclosed, as a routine use, to a contractor of the Agency having need for the information in order to perform a contract. Recipients of information shall be required to comply with the requirements of the Privacy Act of 1974, as amended, pursuant to 5 U.S.C. 552a(m).
5. A record related to an International Application filed under the Patent Cooperation Treaty in this system of records may be disclosed, as a routine use, to the International Bureau of the World Intellectual Property Organization, pursuant to the Patent Cooperation Treaty.
6. A record in this system of records may be disclosed, as a routine use, to another federal agency for purposes of National Security review (35 U.S.C. 181) and for review pursuant to the Atomic Energy Act (42 U.S.C. 218(c)).
7. A record from this system of records may be disclosed, as a routine use, to the Administrator, General Services, or his/her designee, during an inspection of records conducted by GSA as part of that agency's responsibility to recommend improvements in records management practices and programs, under authority of 44 U.S.C. 2904 and 2906. Such disclosure shall be made in accordance with the GSA regulations governing inspection of records for this purpose, and any other relevant (Le., GSA or Commerce) directive. Such disclosure shall not be used to make determinations about individuals.
8. A record from this system of records may be disclosed, as a routine use, to the public after either publication of the application pursuant to 35 U.S.C. 122(b) or issuance of a patent pursuant to 35 U.S.C. 151. Further, a record may be disclosed, subject to the limitations of 37 CFR 1.14, as a routine use, to the public if the record was filed in an application which became abandoned or in which the proceedings were terminated and which application is referenced by either a published application, an application open to public inspection or an issued patent.
9. A record from this system of records may be disclosed, as a routine use, to a Federal, State, or local law enforcement agency, if the USPTO becomes aware of a violation or potential violation of law or regulation.



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Approved for use through 07/31/2008. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL for FY 2005		Application Number	10/050,041
		Filing Date	January 17, 2002
		First Named Inventor	FRANK AUER
		Examiner Name	Alan Matthews
		Art Unit	2851
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	081468-0284994
TOTAL AMOUNT OF PAYMENT		(\$) 100	

METHOD OF PAYMENT (check all that apply)							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____							
<input checked="" type="checkbox"/> Deposit Account		Deposit Account Number: 033975		Deposit Account Name: PILLSBURY WINTHROP LLP			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee					
<input type="checkbox"/> Charge any additional fee(s) or underpayment of fees(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments					
WARNING: Information on this form may become public. Credit Card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	Filing Fees Fee (\$)	Small Entity Fee (\$)	Search Fees Fee (\$)	Small Entity Fee (\$)	Examination Fees Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
Utility	300	150	500	250	200	150	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
Fee Description	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)				
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25					
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100					
Multiple dependent claims	360	180					
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
- 20 or HP =		X	=		Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 or HP =		X	=				
HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.18(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
- 100 =	/50=	(round up to a whole number) x	250.00 =				
4. OTHER FEE(S)							
Non-English Specification, 130 fee (no small entity discount)				_____			
Other: Certificate of Correction Fee (\$100)				100.00			

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	47418
Name (Print/Type)	Emily T. Bell	Telephone	703.905.2261
		Date	January 21, 2005

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2. A record from this system of records may be disclosed, as a routine use, in the course of presenting evidence to a court, magistrate, or administrative tribunal, including disclosures to opposing counsel in the course of settlement negotiations.
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4. A record in this system of records may be disclosed, as a routine use, to a contractor of the Agency having need for the information in order to perform a contract. Recipients of information shall be required to comply with the requirements of the Privacy Act of 1974, as amended, pursuant to 5 U.S.C. 552a(m).
5. A record related to an International Application filed under the Patent Cooperation Treaty in this system of records may be disclosed, as a routine use, to the International Bureau of the World Intellectual Property Organization, pursuant to the Patent Cooperation Treaty.
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**UNITED STATES PATENT AND TRADEMARK
OFFICE CERTIFICATE OF CORRECTION**

PATENT NO : 6791664 *B2*
DATED : September 14, 2004
INVENTOR(S) : FRANK AUER, ET AL

It is certified that error appears in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

On title page, item 54 Title:

replace "LITHOGRAPHIC APPARATUS, DEVICE MANUFACTURING METHOD,
AND DEVICE MANUFACTURING THEREBY"

with

--LITHOGRAPHIC APPARATUS, DEVICE MANUFACTURING METHOD,
AND DEVICE MANUFACTURED THEREBY--

MAILING ADDRESS OF SENDER:
PILLSBURY WINTHROP LLP
P.O. Box 10500
McLean, VA 22102

PATENT NO. 6791664

No. of additional copies



1

This collection of information is required by 37 CFR 1.322, 1.323, and 1.324. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.0 hour to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**UNITED STATES PATENT AND TRADEMARK
OFFICE CERTIFICATE OF CORRECTION**

PATENT NO : 6791664 **B2**
DATED : September 14, 2004
INVENTOR(S) : FRANK AUER, ET AL

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On title page, item 54 Title:

replace "LITHOGRAPHIC APPARATUS, DEVICE MANUFACTURING METHOD,
AND DEVICE MANUFACTURING THEREBY"

with

--LITHOGRAPHIC APPARATUS, DEVICE MANUFACTURING METHOD,
AND DEVICE MANUFACTURED THEREBY--

MAILING ADDRESS OF SENDER:
PILLSBURY WINTHROP LLP
P.O. Box 10500
McLean, VA 22102

PATENT NO. 6791664

No. of additional copies



1

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If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

TO: MFD On (note date): 02/01/05 Pat. No. 6791664B2
Team Leaders Initials
INFO SUPPLIED BY: Tfs 10/050041
OAC/LDRC Initials

SECOND REQUEST (DIFFERENT CORRECITONS), SUPERSEDE OR RECONSIDERATION
(OAC OR LDRC, USE A RED PEN FOR COMPLETING INFO, ON THIS COVER SHEET) (11/2002 cbn)

Team Leader, an Office Automation Clerk may assist you by supplying data from CofC Database (Current & History), PALM, and copies from Intranet, to determine type of request (second request, supersede, and/or reconsideration) and to determine if there were any errors made in decisions and/or publishing are attributable. Team Leader, check appropriate boxes below, key record (if necessary) and forward to JCWS, to order file and assign file to an LIE, to EXPEDITE.

Team Leader, DO NOT ORDER FILE.

MRD (for request attached to this cover sheet): 01/21/2005 (Team Leader have LDRC, stamp same MRD on 1050s.)

File Charged to (in PALM): _____ Date Charged to Loc.: / /

Information re most recent record in CofC database (Check Current & History)

MRD: 10 / 18 / 2004 Examiner (LIE's initials): _____

Date Assigned: / / Turned In: / /

CofC Issued: / / CofC Denied: / / Updated: Y / N Date: / /

Patent number listed on C of C listing in OG ((circle one) Y / N

CofC Issued for this record is attached to patent on Internet ((circle one) Y / N

New/different correction(s) requested. Check Intranet or with RTIS. ((circle one) Y / N

☐ Duplicate (same heading and corrections published/issued CofC on Intranet. ((circle one) Y / N

☐ Substitute or corrected request. Locate the original request (check with JCWS and RTIS).

☒ Second Request (another) requesting new/different corrections or additional corrections. **TEAM LEADER, DO NOT ORDER FILE.** If necessary, call attorney/applicant for assistance in determining if new/different corrections. Team Leader, key new a record on: / /. Place and count with

CofCs keyed, same week, determine and note in to upper right hand corner if "P", "R", or "RTC".

Mark through any corrections on 1050, that were appropriately published; or JCWS assign to: _____

☐ Reconsideration ☐ Supersede ☐ Special CofC ☐ Erratum ☐ Expedite CofC

Team Leader, determine if a Request for a Corrected CofC (Supersede) or Reconsideration, due to error in decisions or keying, attributable to (check the appropriate box, below):

☐ RTIS
Keying Error

☐ LIE: _____
LIE Processing or
Decision Error

☐ OFFICE
Error in Entry of Document
or Ex. Decision

☐ ATTY.
1.323 Consideration
or Petition Required

If errors are attributable to LIE, use guidelines for appropriately notifying the LIE and recording errors (make copies supporting that the LIE made error, attach copies to this cover sheet, keeping copies for your records, and forward copies to CBN, at the end of each month).

☐ JW or OL, locate request for CofC published on: / / and return to: _____
(Circle OAC Initials)

☐ Team Leader keyed record on on: _____ ☐ Post card Printed by Tasneem
(Team Leaders, give all second requests to Tasneem, to print a post card.)

☐ JCWS, order file and assign or reassign to LIE/to: /LIE, see your Team Leader for assistance.

Comments/ Instructions: _____